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Name Peter F. Snell
Date November 29, 2007
of Pages 4

	Client No.	Matter No.	Atty No.
	35452	509	3242

To:

Name	Company	Business#	Fax #
Javier Blanco/Current Examiner	U.S.P.T.O.	571-273-1000	571-273-8300

Comments:

We respectfully submit the following forms: PTO/SB/21; PTO/SB/82; and PTO/SB/96 regarding the following:

Application Number: 10/737,108 (6,994,727) Art Unit: 3738
Applicant: A. Khandkar *et al.* Examiner: Javier Blanco
Filing Date: 12/15/03 (02/07/06) Attorney Docket: 35452-509
Title: Total Disc Implant

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Mintz, Levin, Cohn, Ferris, Glovsky and Popeo, P.C.

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PTO/5B/21 (11-07)


Approved for use through 11/30/2007. OMB 0851-0031
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/737,108 (8,994,727)	
	Filing Date	12/15/03 (02/07/06)	
	First Named Inventor	A. Khandkar	
	Art Unit	3738	
	Examiner Name	Javier Blanco	
Total Number of Pages in This Submission	4	Attorney Docket Number	35452-509

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Statement Under CFR 3.73(b) (1p) Fax Cover Sheet: (1p)
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Mintz, Levin, Cohn, Ferris, Glovsky and Popeo, P.C.		
Signature			
Printed name	Peter F. Snell		
Date	11/29/2007	Reg. No.	52,235

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Kimberly Jones	Date	11/29/2007

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PTO/SB/82 (01-08)

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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/737,108 (6,994,727)
Filing Date	12/15/03 (02/07/06)
First Named Inventor	A. Khandkar, et al.
Art Unit	3738
Examiner Name	Javier Blanco
Attorney Docket Number	35452-609

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

35437

☒ Please change the correspondence address for the above-identified application to:

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Customer Number:

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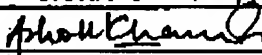
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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Dr. Ashok Khandkar, CEO, Amedica Corporation		
Date	11/27/07	Telephone	(801) 583-5100

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

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PTO/SB/06 (10-07)

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: A. Khandkar, et al.Application No./Patent No.: 10/737,108 / 6,994,727 Filed/Issue Date: 12/15/03 / 02/07/06

Entitled: TOTAL DISC IMPLANT

Amedica Corporation, a Corporation
 (Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest
 (The extent (by percentage) of its ownership interest is _____ %)

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 014809, Frame 0760, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:

1. From: _____ To: _____
 The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
2. From: _____ To: _____
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☐ Additional documents in the chain of title are listed on a supplemental sheet.☐ As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Ashok Khandkar
 Signature

11/27/07
 Date

Dr. Ashok Khandkar
 Printed or Typed Name

(801) 583-5100
 Telephone Number

CEO, Amedica Corporation
 Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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